



# PART B - FEE(S) TRANSMITTAL

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7590 04/05/2006

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04/18/2006 CNEGA2 00000015 03676616

01 FC:2501 700.00 OF  
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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Leon D. Rosen	(Depositor's name)
	(Signature)
April 11, 2006	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/678,616	10/04/2000	Max Harry Weil	20/168	6966

TITLE OF INVENTION: CHEST COMPRESSOR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$0	\$700	07/05/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
MATHEW, FENN C	3764	601-041000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Leon D. Rosen  
2. \_\_\_\_\_  
3. \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Institute of Critical Care Medicine

Rancho Mirage, California

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
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- ☐ A check in the amount of the fee(s) is enclosed.  
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☒ The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 06-1985 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☒ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

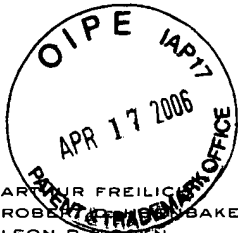
Date April 11, 2006

Typed or printed name Leon D. Rosen

Registration No. 21,077

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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**20/168**

April 11, 2006

Mail Stop Issue Fee  
Commissioner for Patents  
Alexandria, VA 22313-1450

In re Application of:

Max Harry Weil, et al.

Serial No.: 09/678,616

Group Art Unit: 3764

Filed: October 04, 2000

Examiner: Fenn C. Mathew

For: CHEST COMPRESSOR

Dear Sir or Madam:

Enclosed are:

1. Issue Fee Transmittal (PTOL-85B) form.
2. Our check in the amount of \$730.00 to cover Issue and copy fees.
3. Return postal card.

The Commissioner of Patents and Trademarks is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Account No. 06-1985.

I hereby certify that this paper, together with the above-identified enclosures, is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to Mail Stop Issue Fee, Commissioner for Patents, Alexandria, VA 22313-1450, on April 11, 2006.

Respectfully submitted,

Leon D. Rosen  
Reg. No. 21,077  
Attorney for Applicant

LDR/ks  
Encl.  
cc: Joe Bisera